| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| MIDDLE DISTRICT OF TENNESSEE | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | WILLIAM First name JEFFERSON Middle name MEARS Last name and Suffix (Sr., Jr., II, III) | KIMBERLY First name ANN Middle name MEARS Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | FKA KIMBERLY ANN BRINKLEY |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5759 | xxx-xx-2844 |

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ■ I have not used any business name or EINs. Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | 539 MORRIS DR. Murfreesboro, TN 37130 | If Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Rutherford County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

Debtor 2 KIMBERLY ANN MEARS Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? □ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

WILLIAM JEFFERSON MEARS

| | otor 2 WILLIAM JEFFER KIMBERLY ANN N | | ARS | Case number (if known) |
|---------------------|---|--------------------|---|--|
| Par | t 3: Report About Any Bu | ısinesses | You Own as a Sole Proprie | itor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | |
| | | ☐ Yes. | Name and location of bu | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, Sta | |
| | it to this petition. | | | ox to describe your business: |
| | | | | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | _ • | I Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | defined in 11 U.S.C. § 101(53A)) |
| | | | | er (as defined in 11 U.S.C. § 101(6)) |
| ☐ None of the above | | | | e |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you indicate that you are | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of <i>small</i> | ■ No. | I am not filing under Cha | pter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property or Ar | y Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat | ■ No. | | |
| | of imminent and identifiable hazard to public health or safety? | □ res. | What is the hazard? | |
| | Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | |
| | ○ | | | Number, Street, City, State & Zip Code |
| | | | | |

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

page 5

/s/ KIMBERLY ANN MEARS KIMBERLY ANN MEARS

Executed on January 31, 2018

MM / DD / YYYY

Signature of Debtor 2

and 3571.

Signature of Debtor 1

/s/ WILLIAM JEFFERSON MEARS

WILLIAM JEFFERSON MEARS

Executed on January 31, 2018

MM / DD / YYYY

| Debtor 1 | WILLIAM JEFFERSON MEARS | | |
|----------|-------------------------|------------------------|--|
| Debtor 2 | KIMBERLY ANN MEARS | Case number (if known) | |
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ James A. Flexer | Date | January 31, 2018 | |
|--|---------------|------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| James A. Flexer 9447 | | | |
| Printed name | | | |
| Flexer Law | | | |
| Firm name | | | |
| 1900 Church Street, Suite 400 | | | |
| Nashville, TN 37203 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone | Email address | | |
| 9447 | | | |
| Bar number & State | | | |

| Fill in this | information to identify your of | case: | | | |
|--|---|---|--|--------------|-------------------------------|
| Debtor 1 | WILLIAM JEFFER | SON MEARS | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | KIMBERLY ANN N First Name | | Lock Nome | | |
| (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| United Sta | tes Bankruptcy Court for the: | MIDDLE DISTRICT OF | TENNESSEE | | |
| Case num | per | | | | |
| (if known) | | | | ☐ Check | k if this is an |
| | | | | amen | ded filing |
| Summa Be as com information your origin | plete and accurate as possible. Fill out all of your schedule. | le. If two married peoples first; then complete t | nd Certain Statistical Information e are filing together, both are equally responsible former information on this form. If you are filing amend the box at the top of this page. | or supplyin | |
| rait i. | Julilliarize Tour Assets | | | Your a | ssets of what you own |
| 1. Sche | dule A/B: Property (Official Fo | orm 106A/R) | | | |
| | | | | \$ | 0.00 |
| 1b. C | opy line 62, Total personal prop | perty, from Schedule A/B | | \$ | 108,485.00 |
| 1c. C | opy line 63, Total of all property | on Schedule A/B | | \$ | 108,485.00 |
| Part 2: | Summarize Your Liabilities | | | | |
| | | | | | abilities t you owe |
| | dule D: Creditors Who Have Cla opy the total you listed in Colun | | y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i> | \$ | 55,536.00 |
| 3. Sche 3a. C | dule E/F: Creditors Who Have to opy the total claims from Part 1 | Unsecured Claims (Offici 1 (priority unsecured clair | al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i> | \$ | 10,000.00 |
| | | | claims) from line 6j of Schedule E/F | \$ | 14,464.00 |
| | | | | | , |
| | | | Your total liabilities | \$ | 80,000.00 |
| Part 3: | Summarize Your Income and | Expenses | | | |
| | dule I: Your Income (Official For | | e I | \$ | 4,239.00 |
| | dule J: Your Expenses (Official your monthly expenses from lin | , | | \$ | 2,844.00 |
| Part 4: | Answer These Questions for | Administrative and Sta | tistical Records | | |
| G A | ou filing for honderman | or Chanters 7 44 401 | <u> </u> | | |
| | ou filing for bankruptcy unde No. You have nothing to report | | ? Check this box and submit this form to the court with yo | ur other sch | nedules. |
| | Yes | | | | |
| | kind of debt do you have? | | | | |
| | | | | | |
| | | | debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159. | a personal, | , family, or |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information
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the court with your other schedules.

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,785.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|--|---------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 10,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 10,000.00 |

Best Case Bankruptcy

Doc 1

| Debte | or 1 | WILLIAM JEFFERSON | MEADS | | |
|---------------------------|--|--|--|--|--|
| | и і | First Name | Middle Name Last Name | | |
| Debto (Spous | or 2 e, if filing) | KIMBERLY ANN MEAR First Name | RS Middle Name Last Name | | |
| Unite | d States Bar | nkruptcy Court for the: MIDE | DLE DISTRICT OF TENNESSEE | | |
| Case | number _ | | | | ☐ Check if this is an amended filing |
| Offi | cial Fo | rm 106A/B | | | |
| Sc | nedule | e A/B: Propert | у | | 12/15 |
| hink it nform Answe | fits best. Be ation. If more r every quest | e as complete and accurate as per space is needed, attach a sepa cion. | s. List an asset only once. If an asset fits in more than one obssible. If two married people are filing together, both a crate sheet to this form. On the top of any additional pages. | are equally responsible for su | upplying correct |
| Part 1 | Describe I | Each Residence, Building, Land | , or Other Real Estate You Own or Have an Interest In | | |
| l. Do | ou own or h | ave any legal or equitable intere | est in any residence, building, land, or similar property? | | |
| | lo. Go to Part | 2. | | | |
| | es. Where is | the property? | | | |
| Part 2 | Describe \ | Your Vehicles | | | |
| someo | ne else driv | | e interest in any vehicles, whether they are registed or report it on Schedule G: Executory Contracts and Lehicles, motorcycles | | ehicles you own that |
| Someo | ne else driv rs, vans, tru No /es | es. If you lease a vehicle, also | o report it on <i>Schedule G: Executory Contracts and L</i> | Jnexpired Leases. | ŕ |
| somed B. Ca | ne else driv rs, vans, tru No res Make: <u>N</u> | es. If you lease a vehicle, also | report it on Schedule G: Executory Contracts and L | Do not deduct secured clube amount of any secure | , |
| Someo | ne else driv | NISSAN MAXIMA | o report it on Schedule G: Executory Contracts and Lehicles, motorcycles Who has an interest in the property? Check one | Do not deduct secured clube amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| Someo | Make: Model: Year: Approximate | NISSAN MAXIMA 2012 e mileage: 55,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured cl the amount of any secure Creditors Who Have Clair | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| Someo | Make: Model: Year: | NISSAN MAXIMA 2012 e mileage: 55,000 nation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Someo | Make: Make: Model: Approximate Other inform UNDER 9 | NISSAN NAXIMA 2012 e mileage: 55,000 eation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$13,925.00 Do not deduct secured of the amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,925.00 laims or exemptions. Put ed claims on Schedule D: |
| 3. Ca | Make: Other inform Make: Make: Model: | NISSAN MAXIMA 2012 e mileage: 55,000 eation: 10 FORD F-150 2015 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$13,925.00 Do not deduct secured of the amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,925.00 |
| 3. Ca | Make: F Model: F | AISSAN MAXIMA 2012 e mileage: 55,000 eation: 50RD F-150 emileage: 20,000 eation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the entire property? \$13,925.00 Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,925.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| 3. Ca | Make: F Model: F | AISSAN MAXIMA 2012 e mileage: 55,000 eation: 50RD F-150 emileage: 20,000 eation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the entire property? \$13,925.00 Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,925.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |

Official Form 106A/B Schedule A/B: Property

page 1

| Debtor 1 WILLIAM JEFFERSON MEARS Debtor 2 KIMBERLY ANN MEARS Case number (| (if known) |
|--|---|
| 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries fo pages you have attached for Part 2. Write that number here | |
| Part 3: Describe Your Personal and Household Items | |
| Do you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe | |
| STOVE 900, BOISE SPEAKER 50, HEADPHONES 100 UNDER 365 | \$1,050.00 |
| | |
| FLUTE UNDER 365 | \$400.00 |
| 2 BEDROOM SUITE - 600, LIVING ROOM SUITE - 300, DINING ROOM SUITE - 300, CLOTHING WASHER - 200, CLOTHING DRYER - 200, MISC. KITCHEN APPLIANCE - 100, KITCHEN UTENSILS - 100, LINENS - 100, DECORATIONS - 100, VACUUM - 25 | \$2,025.00 |
| 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners including cell phones, cameras, media players, games □ No ■ Yes. Describe 3 TELEVISIONS - 900, 2 IPADS - 200, IPAD MINI - 100, BLU RAY PLAYER - 50 | ; music collections; electronic devices \$1,250.00 |
| 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta other collections, memorabilia, collectibles ■ No □ Yes. Describe | mp, coin, or baseball card collections; |
| 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; musical instruments □ No ■ Yes. Describe | canoes and kayaks; carpentry tools; |
| GOLF CLUBS - 700 | \$700.00 |
| 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No ■ Yes. Describe | |
| SMITH & WESSON HAND GUN 400, GLOCK (17) 400, HENRY 22 RIFLE 200 | \$1,000.00 |

Official Form 106A/B Schedule A/B: Property page 2

| | ebtor 1 ebtor 2 | | AM JEF ERLY A | | ON MEARS ARS | | Case number (if known) | |
|-----|--------------------|------------------------------------|------------------------|-----------|------------------------|---|--|--|
| 11. | □ No | | | thes, fur | s, leather coats, des | signer wear, shoes, accessories | | |
| | | | [| CLOTI | HING | | | \$500.00 |
| 12. | □ No | , | | elry, cos | stume jewelry, enga | gement rings, wedding rings, he | irloom jewelry, watches, gems, ç | gold, silver |
| | | | | WEDD | ING RING - 900, | COSTUME JEWELRY - 100 |) | \$1,000.00 |
| 13. | □ No | rm anima bles: Dogs Describe | s, cats, b | | | | | |
| | | | ļ | 2 DOG | iS | | | \$0.00 |
| 14. | □ No | her perso | | rmation. | | not already list, including any | health aids you did not list | |
| | | | | CUSTO | OM WHEEL/TIRE R 365 | S . | | \$1,000.00 |
| Pa | for Pa | art 3. Wri | te that n ur Financ | umber i | neres | art 3, including any entries fo | | \$8,925.00 |
| De | o you ow | n or hav | e any le | gal or e | quitable interest in | any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ■ No | | | | | ome, in a safe deposit box, and o | on hand when you file your petiti | on |
| 17. | | oles: Che | cking, sa | | | ounts; certificates of deposit; sha s with the same institution, list ea | ares in credit unions, brokerage lach. | houses, and other similar |
| | ☐ No ■ Yes | | | | | Institution name: | | |
| | | | | 17.1. | CHECKING | FIRST TENNESSEE | BANK | \$0.00 |
| | | | | 17.2. | SAVINGS | FIRST TENNESSEE | BANK | \$0.00 |
| | | | | 17.3. | CHECKING | FIRST TENNESSEE | BANK | \$60.00 |

Official Form 106A/B

Schedule A/B: Property

page 3

Best Case Bankruptcy

| | | 17.4. CHECKING | BANK OF AMERICA | | \$0.00 |
|----|--|--------------------------------------|---|--|---------------|
| 18 | Bonds, mutual funds, or Examples: Bond funds, in | | okerage firms, money market accounts | S | |
| | ■ No □ Yes | Institution or issuer | name: | | |
| 19 | joint venture | k and interests in incorp | prated and unincorporated business | ses, including an interest in an LLC, part | tnership, and |
| | ■ No □ Yes. Give specific inform | mation about them Name of entity: | | % of ownership: | |
| 20 | Negotiable instruments in | clude personal checks, cas | otiable and non-negotiable instrume shiers' checks, promissory notes, and r ansfer to someone by signing or deliver | money orders. | |
| | ☐ Yes. Give specific inform | nation about them Issuer name: | | | |
| 21 | Retirement or pension as Examples: Interests in IRA | | 403(b), thrift savings accounts, or other | pension or profit-sharing plans | |
| | Yes. List each account s | separately. Type of account: | Institution name: | | |
| | | 401K | HEWITT | | \$36,000.00 |
| 22 | | deposits you have made so | o that you may continue service or use public utilities (electric, gas, water), tel | from a company lecommunications companies, or others | |
| | ☐ Yes | | Institution name or individual: | | |
| 23 | Annuities (A contract for a | a periodic payment of mone | ey to you, either for life or for a number | r of years) | |
| | ☐ Yes Issue | er name and description. | | | |
| 24 | 26 U.S.C. §§ 530(b)(1), 529 | | ualified ABLE program, or under a c | qualified state tuition program. | |
| | ■ No □ Yes Instit | tution name and description | n. Separately file the records of any int | terests.11 U.S.C. § 521(c): | |
| 25 | ■ No | | ther than anything listed in line 1), a | and rights or powers exercisable for you | r benefit |
| | ☐ Yes. Give specific inform | mation about them | | | |
| 26 | | | nd other intellectual property eds from royalties and licensing agreen | nents | |
| | ☐ Yes. Give specific inform | mation about them | | | |
| 27 | Licenses, franchises, and Examples: Building permitNo | | es perative association holdings, liquor lice | enses, professional licenses | |
| | ☐ Yes. Give specific inform | mation about them | | | |
| M | oney or property owed to | you? | | Current va portion you Do not deal | |

Official Form 106A/B

Schedule A/B: Property

page 4

Best Case Bankruptcy

| Debtor 2 | | | Case number (if known) | | |
|------------------------|---|--|-------------------------------|--|--|
| | | | claims or exemptions. | | |
| 28. Tax □ No | refunds owed to you | | | | |
| ■ Ye | es. Give specific information abou | at them, including whether you already filed the returns and the tax years. | | | |
| | | | | | |
| | | ANTICIPATED 2017 FEDERAL TAX REFUND FEDERAL | \$1,200.00 | | |
| Exa ■ No | 0 | mony, spousal support, child support, maintenance, divorce settlement, p | roperty settlement | | |
| ⊔ Y€ | es. Give specific information | | | | |
| Exa | benefits; unpaid loans yo | nsurance payments, disability benefits, sick pay, vacation pay, workers' | compensation, Social Security | | |
| | | DEBTOR-WIFE IS OWED CHILD SUPPORT ARREARAGE. | \$20,000.00 | | |
| Exa No Ye 32. Any | es. Name the insurance company Compar interest in property that is due ou are the beneficiary of a living to neone has died. | asurance; health savings account (HSA); credit, homeowner's, or renter's of each policy and list its value. Beneficiary: you from someone who has died rust, expect proceeds from a life insurance policy, or are currently entitled | Surrender or refund value: | | |
| □ Ye | es. Give specific information | | | | |
| Exa ■ No | amples: Accidents, employment d | ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue | | | |
| | 0 | claims of every nature, including counterclaims of the debtor and right | ghts to set off claims | | |
| ■ Ye | es. Describe each claim | | | | |
| | | POTENTIAL FRAUD ACTION - CONSUMER PROTECTION ACTION AGAINST JAMES HOWSE | Unknown | | |
| ■ No | financial assets you did not all o see. Give specific information | ready list | | | |
| | - | entries from Part 4, including any entries for pages you have attach | \$67.260.00 I | | |
| Part 5: | Describe Any Business-Related Pro | operty You Own or Have an Interest In. List any real estate in Part 1. | | | |

Official Form 106A/B Schedule A/B: Property page 5

| Debt | | | Case number (if known) | |
|--------------|---|------------------------|------------------------------|--------------|
| 37. D | o you own or have any legal or equitable interest in any business-relate | d property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 46. C | o you own or have any legal or equitable interest in any farm- | or commercial fishir | g-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| - | Oo you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information | , | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that | at number here | | \$0.00 |
| Part | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$42,300.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$8,925.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$57,260.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$108,485.00 | Copy personal property total | \$108,485.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$108,485.00 |

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------------------|--------------------|-----------|--|--|--|--|
| Debtor 1 | | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | KIMBERLY ANN I | MEARS | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | MIDDLE DISTRICT OF | TENNESSEE | | | | |
| Case number | ☐ Check if this is an amended filing | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the Property You Claim as Exempt |
|---------|---|
| | |

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | | |
|----|--|--------------------------------------|-----|---|------------------------------------|--|--|--|
| | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | ☐ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | |
| | FLUTE UNDER 365 | \$400.00 | | \$280.00 | Tenn. Code Ann. § 26-2-103 | | | |
| | Line from Schedule A/B: 6.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | 2 BEDROOM SUITE - 600, LIVING ROOM SUITE - 300, DINING ROOM | \$2,025.00 | • | \$2,025.00 | Tenn. Code Ann. § 26-2-103 | | | |
| | SUITE - 300, CLOTHING WASHER - 200, CLOTHING DRYER - 200, MISC. KITCHEN APPLIANCE - 100, KITCHEN UTENSILS - 100, LINENS - 100, DECORATIONS - 100 , VACUUM - 25 Line from Schedule A/B: 6.3 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | 3 TELEVISIONS - 900, 2 IPADS - 200, IPAD MINI - 100, BLU RAY PLAYER - | \$1,250.00 | • | \$1,250.00 | Tenn. Code Ann. § 26-2-103 | | | |
| | 50 Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | GOLF CLUBS - 700 Line from Schedule A/B: 9.1 | \$700.00 | | \$700.00 | Tenn. Code Ann. § 26-2-103 | | | |
| | Ellio Horii Gorioddio 74 D. 911 | | | 100% of fair market value, up to any applicable statutory limit | | | | |

Doc 1

Desc Main

WILLIAM JEFFERSON MEARS Debtor 1 Debtor 2 KIMBERLY ANN MEARS Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **SMITH & WESSON HAND GUN 400,** Tenn. Code Ann. § 26-2-103 \$1,000.00 \$1,000.00 GLOCK (17) 400, HENRY 22 RIFLE 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 10.1 **CLOTHING** Tenn. Code Ann. § 26-2-104 \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **WEDDING RING - 900, COSTUME** Tenn. Code Ann. § 26-2-103 \$1,000.00 \$1,000.00 JEWELRY - 100 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 401K: HEWITT Tenn. Code Ann. § \$36,000.00 100% 26-2-111(1)(D) Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **FEDERAL: ANTICIPATED 2017** Tenn. Code Ann. § 26-2-103 \$1,200.00 \$1,200.00 **FEDERAL TAX REFUND** Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit **POTENTIAL FRAUD ACTION -**Tenn. Code Ann. § 26-2-103 Unknown \$10,000.00 CONSUMER PROTECTION ACTION **AGAINST JAMES HOWSE** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 34.1 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Official Form 106C

П

Nο

Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

| Debtor 1 WILLIAM JEFFERSON MEARS Motion Name Last Name | | | | | | |
|---|--|-------------------------|--|-----------------------------------|------------------------|------------|
| Debtor 2 (Speared, life (life)) First Nome (MIMBERLY ANN MEARS First Rome (Middle Name (Middle N | Fill in this informa | tion to identify you | r case: | | | |
| Debtor 2 (Speared, life (life)) First Nome (MIMBERLY ANN MEARS First Rome (Middle Name (Middle N | Debtor 1 | WILLIAM IEEEE | DSON MEADS | | | |
| United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE Case number | Debtor 1 | | | | | |
| United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE Case number Ca | Debtor 2 | KIMBERLY ANN | MEARS | | | |
| Case number Check if this is an amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, lill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case under (if the continuation of the continua | (Spouse if, filing) | | | | | |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space a received copy, the Additional Page, fill if out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case with the fill of the entries and submit this form to the court with your other schedules. You have nothing else to report on this form. In yes, Fill in all of the information below. POTEST: List All Secured Claims It is all of the information below. POTEST: List All Secured Claims. If a receitor has a particular claim, list the creditor separately for each claim. If a receitor has a particular claim, list the other creditors in Part 2. As mount of claim and the potential pages. Who are claims as possible, this dealms in aphabetical order according to the creditor's name. ATTH MANAGING OFFICER P. D. Box 380901 As of the date you file, the claim is: Check all that apply. Bloomington, MN 55438 Number, Smer. City, State & 2p Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only At It least one of the debtors and another Check all that apply. Last 4 digits of account number 6435 22 C&f Finance Company Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Last 4 digits of account number 6435 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Last 4 digits ded account number 6435 22 C&f Finance Company Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles Unliquidated Debtor 1 only Coloringent Number, Street, City, State & 2p Code Number of the debtors and another claim secured to the debtors and another claim secured the claim secures the claim: 2014 NISSAN MAXIMA 55,000 miles Undealth of the | United States Bank | ruptcy Court for the: | MIDDLE DISTRICT OF TENNESSEE | | | |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space a received copy, the Additional Page, fill if out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case with the fill of the entries and submit this form to the court with your other schedules. You have nothing else to report on this form. In yes, Fill in all of the information below. POTEST: List All Secured Claims It is all of the information below. POTEST: List All Secured Claims. If a receitor has a particular claim, list the creditor separately for each claim. If a receitor has a particular claim, list the other creditors in Part 2. As mount of claim and the potential pages. Who are claims as possible, this dealms in aphabetical order according to the creditor's name. ATTH MANAGING OFFICER P. D. Box 380901 As of the date you file, the claim is: Check all that apply. Bloomington, MN 55438 Number, Smer. City, State & 2p Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only At It least one of the debtors and another Check all that apply. Last 4 digits of account number 6435 22 C&f Finance Company Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Last 4 digits of account number 6435 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Last 4 digits ded account number 6435 22 C&f Finance Company Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles Unliquidated Debtor 1 only Coloringent Number, Street, City, State & 2p Code Number of the debtors and another claim secured to the debtors and another claim secured the claim secures the claim: 2014 NISSAN MAXIMA 55,000 miles Undealth of the | Casa numbar | | | | | |
| Bo as complete and accurate as possible. It we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, with your name and case number (if known). No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. | | | | | _ | |
| Bo as complete and accurate as possible. It we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, with your name and case number (if known). No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. | Official Form | 106D | | | | |
| Se as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case unumber (if known). 1. Do any creditors have claims secured by your property? 1. Do any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately for each claim. If more than one recreditor has as particular claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately for each claim. If more than one recreditor has a particular claim, list the creditor's separately. If the claim is claim shall be declaims in aphabetical order according to the creditor's name. 2.1 All y Financial | | | | | | |
| s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1, Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. | Schedule D |): Creditors | Who Have Claims Secure | ed by Propert | У | 12/15 |
| No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. | | | | | | |
| ■ Yes. Fill in all of the information below. Part 1: List All Secured Claims | 1. Do any creditors ha | ave claims secured by | your property? | | | |
| ### Column A Column B | □ No. Check the property of the property o | nis box and submit th | nis form to the court with your other schedules. | You have nothing else t | o report on this form. | |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim that supports this claim claim sin sphabeted or doer according to the creditor's name. 2.1 Ally Financial Creditor's Name ATTN MANAGING OFFICER P. O. Box 380901 Bloomington, IM \$5438 Number, Street, City, State & Zip Code Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 Describe the property that secures the claim: \$130,000.00 Column A Amount of claim that supports this claim and the value of collateral that supports this claim on the creditor's name. \$20,000.00 2015 FORD F-150 20,000 miles OVER 910 As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 Last 4 digits of account number 6435 Last 4 digits of account number 6435 Amount of claim that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports the value of c | Yes. Fill in a | Il of the information b | pelow. | | | |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim that supports this claim claim sin sphabeted or doer according to the creditor's name. 2.1 Ally Financial Creditor's Name ATTN MANAGING OFFICER P. O. Box 380901 Bloomington, IM \$5438 Number, Street, City, State & Zip Code Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 Describe the property that secures the claim: \$130,000.00 Column A Amount of claim that supports this claim and the value of collateral that supports this claim on the creditor's name. \$20,000.00 2015 FORD F-150 20,000 miles OVER 910 As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 Last 4 digits of account number 6435 Last 4 digits of account number 6435 Amount of claim that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports this claim state upon the value of collateral that supports the value of c | | | | | | |
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| ATTN MANAGING OFFICER P.o. Box 380901 Bloomington, MN 55438 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another or community debt Describe the property that secures the claim: 1313 E Main St Ste 400 Richmond, VA 23219 Number, Street, City, Slate & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another or community debt Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Describe the property that secures the claim: 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is | for each claim. If more | e than one creditor has | a particular claim, list the other creditors in Part 2. As | Amount of claim Do not deduct the | that supports this | portion |
| ATTN MANAGING OFFICER P.O. Box 380901 Bloomington, MN 55438 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 2.2 C&f Finance Company Creditor's Name Creditor's Name Describe the property that secures the claim: Number, Street, City, State & Zip Code Who owes the debt? Check one. As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Creditor's Name Describe the property that secures the claim: \$18,742.00 \$13,925.00 \$4,817.00 \$4,817.00 \$4,817.00 Creditor's Name Describe the property that secures the claim is: Check all that apply. Creditor's Name As of the date you file, the claim is: Check all that apply. Contingent Undiquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit | | ial | Describe the property that secures the claim: | \$30,000.00 | \$28,375.00 | \$1,625.00 |
| Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Street Company Creditor's Name Creditor's Name Describe the property that secures the claim: 1313 E Main St Ste 400 Richmond, VA 23219 Number, Street, City, State & Zip Code Richmond, VA 23219 Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as tax lien, mechanic's lien) As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. An an agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Unliquidated Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | ATTN MANA OFFICER P.o. Box 38 | 0901 | OVER 910 As of the date you file, the claim is: Check all that apply. | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another community debt Date debt was incurred 5/2015 Creditor's Name Creditor's Name Creditor's Name Creditor's Name Describe the property that secures the claim: Nature of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Mumber, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Jisquement jou made (such as mortgage or secured car loan) Judgment lien from a lawsuit An agreement you made (such as mortgage or secured car loan) Judgment lien from a lawsuit As a fit hat apply. Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | Number, Street, Ci | ity, State & Zip Code | _ | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 community debt Last 4 digits of account number 6435 Last 4 digits of ac | | | | | | |
| □ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 Cast | Who owes the debt | ? Check one. | | | | |
| □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 2.2 C&f Finance Company Creditor's Name Describe the property that secures the claim: UNDER 910 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Check if this claim relates to a community debt □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | Debtor 1 only | | An agreement you made (such as mortgage or s | ecured | | |
| At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 2.2 C&f Finance Company Creditor's Name Describe the property that secures the claim: \$18,742.00 \$13,925.00 \$4,817.00 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | Debtor 2 only | | car loan) | | | |
| Check if this claim relates to a community debt Date debt was incurred 5/2015 Last 4 digits of account number 6435 2.2 C&f Finance Company Creditor's Name Describe the property that secures the claim: \$18,742.00 \$13,925.00 \$4,817.00 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Other (including a right to offset) Last 4 digits of account number 6435 State 4 digits of account number 6435 State 4 digits of account number 6435 Last 4 digits of account number 6435 State 4 digits of account number 6435 | ☐ Debtor 1 and Debt | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Cate debt was incurred 5/2015 Last 4 digits of account number 6435 2.2 C&f Finance Company Creditor's Name Describe the property that secures the claim: \$18,742.00 \$13,925.00 \$4,817.00 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Contingent Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only At least one of the debtors and another Signal A digits of account number 6435 Last 4 digits of account number 6435 | At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | |
| 2.2 C&f Finance Company Creditor's Name Describe the property that secures the claim: 1313 E Main St Ste 400 Richmond, VA 23219 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Describe the property that secures the claim: \$18,742.00 \$13,925.00 \$4,817.00 \$ | | | Other (including a right to offset) | | | |
| Creditor's Name 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Richmond, VA 23219 Number, Street, City, State & Zip Code Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Unliquidated Unliquidated Unliquidated Unliquidated Statute of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Unliquidated Unliquid | Date debt was incurr | red <u>5/2015</u> | Last 4 digits of account number 6435 | | | |
| Creditor's Name 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Richmond, VA 23219 Number, Street, City, State & Zip Code Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another 2012 NISSAN MAXIMA 55,000 miles UNDER 910 As of the date you file, the claim is: Check all that apply. Unliquidated Unliquidated Unliquidated Unliquidated Statute of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Unliquidated Unliquid | 2.2 C&f Finance | e Company | Describe the property that secures the claim: | \$18.742.00 | \$13.925.00 | \$4.817.00 |
| As of the date you file, the claim is: Check all that apply. Contingent Contingent Disputed | | o company | · · · · · | <u> </u> | <u> </u> | <u> </u> |
| Richmond, VA 23219 Contingent Contingent | | | | | | |
| Richmond, VA 23219 Number, Street, City, State & Zip Code Unliquidated Disputed | 4242 E Mair | C4 C4- 400 | As of the date you file, the claim is: Check all that | | | |
| Number, Street, City, State & Zip Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another | | | | | | |
| Who owes the debt? Check one. □ Disputed Nature of lien. Check all that apply. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Judgment lien from a lawsuit | | | | | | |
| Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Judgment lien from a lawsuit | Number, Street, C | ity, State & Zip Code | • | | | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Who owes the debt | ? Check one. | | | | |
| □ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit | _ | | _ | oourod | | |
| □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit | _ | | | couleu | | |
| At least one of the debtors and another Judgment lien from a lawsuit | | or 2 only | | | | |
| | _ | • | | | | |
| | _ | | _ | | | |

Official Form 106D

community debt

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 4

| Debtor 1 WILLIAM JEFFERSON MEARS | | | MEARS | Case number (if know) | | | |
|----------------------------------|--|----------------------|---|-----------------------|------------|---------------|--|
| Daha | First Name | Middle N | | | | | |
| Debte | or 2 KIMBERL | Y ANN MEAR | | | | | |
| | , not riamo | illiadio il | 2001.10110 | | | | |
| | | Opened 03/16 Last | | | | | |
| | | Active | | | | | |
| Date | debt was incurred | 12/22/17 | Last 4 digits of account number 1774 | | | | |
| | | | | | | | |
| 2.3 | Conn's Homel | Plus | Describe the property that secures the claim: | <u>\$1,765.00</u> | \$1,050.00 | \$715.00 | |
| | Creditor's Name | | STOVE 900, BOISE SPEAKER 50, HEADPHONES 100 UNDER 365 | | | | |
| | Attn: Bankrup PO Box 2358 | - | As of the date you file, the claim is: Check all that apply. | | | | |
| _ | Beaumont, TX | 77704 | ☐ Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | |
| Who | owes the debt? | check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ De | ebtor 1 only | | An agreement you made (such as mortgage or sec | rured | | | |
| | ebtor 2 only | | car loan) | Juica | | | |
| _ | ebtor 1 and Debtor 2 | ? only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| | least one of the deb | • | ☐ Judgment lien from a lawsuit | | | | |
| _ | neck if this claim re | | ☐ Other (including a right to offset) | | | | |
| C | ommunity debt | | | | | | |
| | | Opened | | | | | |
| | | 11/17 Last | | | | | |
| | | Active | 7070 | | | | |
| Date | debt was incurred | 12/31/17 | Last 4 digits of account number 7670 | | | | |
| 2.4 | Covington Cre | edit/smc | Describe the property that secures the claim: | \$739.00 | \$1,900.00 | \$0.00 | |
| | Creditor's Name | | 2 TELEVISIONS, GOLF CLUBS, 2 | | <u> </u> | 7000 | |
| | | | IPADS, IPAD MINI | | | | |
| | 150 Executive | Center | As of the date you file, the claim is: Check all that | | | | |
| | Drive | 00045 | apply. | | | | |
| _ | Greenville, SC | | Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | Unliquidated | | | | |
| Who | owes the debt? | hook one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ | | neck one. | _ | | | | |
| _ | ebtor 1 only | | An agreement you made (such as mortgage or sec car loan) | cured | | | |
| | ebtor 2 only | \b. | ' | | | | |
| _ | ebtor 1 and Debtor 2 least one of the deb | • | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit | | | | |
| | neck if this claim re | | - VOID LIEN | | | | |
| | ommunity debt | idios to u | Other (including a right to offset) | | | | |
| | | Opened | | | | | |
| | | 11/17 Last | | | | | |
| | | Active | Last 4 digits of account number 7726 | | | | |
| Date | debt was incurred | 12/29/17 | Last 4 digits of account number 7726 | | | | |
| 2.5 | MUSIC STOP | | Describe the property that secures the claim: | \$120.00 | \$400.00 | \$0.00 | |
| | Creditor's Name | | FLUTE | | <u> </u> | V 0100 | |
| | | | UNDER 365 | | | | |
| | | | As of the date you file, the claim is: Check all that | | | | |
| | 215 Robert Ro | | apply. | | | | |
| _ | Murfreesboro, | | Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | Unliquidated | | | | |
| \A/b a | owes the debt? C | book one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| | OWES LIE UEDL! U | HIGGN UHG. | inature of field officer all that apply. | | | | |

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Official Form 106D

Best Case Bankruptcy

page 2 of 4

| Debtor 1 WILLIAM JEFFERSON MEARS | | | Case number (if know) | | | |
|---|------------------|---|-----------------------|------------|------------|--|
| First Name Middle Name Last Name | | | | | | |
| | ANN MEARS | 8 | | | | |
| First Name | Middle N | ame Last Name | | | | |
| _ | | _ | | | | |
| ■ Debtor 1 only | | An agreement you made (such as mortgage or secu | red | | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debtor 2 of | nly | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| ☐ At least one of the debto | ors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim rela | ites to a | Other (including a right to offset) | | | | |
| community debt | | | | | | |
| Date debt was incurred _ | | Last 4 digits of account number | | | | |
| | | | | | | |
| 2.6 PATRIOT | | Describe the property that secures the claim: | \$2,000.00 | \$1,000.00 | \$1,000.00 | |
| Creditor's Name | | CUSTOM WHEELS AND TIRES UNDER 365 | | | | |
| 5185 PETERS C ROAD | REEK | As of the date you file, the claim is: Check all that | | | | |
| Roanoke, VA 24 | 1019 | apply. ☐ Contingent | | | | |
| Number, Street, City, Sta | | ☐ Unliquidated | | | | |
| riambor, caroa, only, on | u <u></u> p 0000 | ☐ Disputed | | | | |
| Who owes the debt? Che | eck one. | Nature of lien. Check all that apply. | | | | |
| ☐ Debtor 1 only | | ■ An agreement you made (such as mortgage or secu | rod | | | |
| Debtor 2 only | | car loan) | | | | |
| ■ Debtor 1 and Debtor 2 of | unly. | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| ☐ At least one of the debto | - | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim rela | | ☐ Other (including a right to offset) | | | | |
| community debt | ites to a | Other (including a right to offset) | | | | |
| · | | Lock A digita of account number | | | | |
| Date debt was incurred _ | | Last 4 digits of account number | | | | |
| 2.7 World Acceptar | oce Corn | Describe the property that secures the claim: | \$2,170.00 | \$1,900.00 | \$270.00 | |
| Creditor's Name | ice corp | 2 TELEVISIONS, GOLF CLUBS, 2 | Ψ2,170.00 | Ψ1,300.00 | Ψ210.00 | |
| ordanor o manno | | IPADS, IPAD MINI | | | | |
| Attn: Bankrupto | ·v | IFADS, IFAD WIINI | | | | |
| PO Box 6429 | <i>,</i> y | As of the date you file, the claim is: Check all that | | | | |
| Greenville, SC 2 | 29606 | apply. □ Contingent | | | | |
| Number, Street, City, Sta | | ☐ Unliquidated | | | | |
| Number, Street, Oity, Sta | ie a zip code | ☐ Disputed | | | | |
| Who owes the debt? Che | eck one | Nature of lien. Check all that apply. | | | | |
| _ | SOR ONG. | _ | | | | |
| Debtor 1 only | | An agreement you made (such as mortgage or secu car loan) | red | | | |
| Debtor 2 only | | _ ′ | | | | |
| Debtor 1 and Debtor 2 o | • | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | |
| At least one of the debto | | Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | | Other (including a right to offset) VOID LIEN | | | | |
| | Opened | | | | | |
| | 09/17 Last | | | | | |
| | Active | | | | | |
| Date debt was incurred | 12/08/17 | Last 4 digits of account number 6701 | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| Add the dollar value of y | our entries in C | column A on this page. Write that number here: | \$55,536.00 | | | |
| If this is the last page of | your form, add | the dollar value totals from all pages. | \$55,536.00 | | | |
| Write that number here: | | | 7, | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Doc 1

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 4

| Debtor 1 | WILLIAM JEFFER | SON MEARS | | Case number (if know) | |
|----------|----------------|-------------|-----------|-----------------------|--|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | KIMBERLY ANN N | MEARS | | | |

Last Name

debts in Part 1, do not fill out or submit this page.

Middle Name

First Name

| Fill in th | is information to identify your case: | | | | | |
|--------------------------|--|---|---|--------------------------|--------------------|------------------------|
| Debtor 1 | WILLIAM JEFFERSON | I MEARS | | | | |
| | First Name | | ast Name | _ | | |
| Debtor 2 (Spouse if, | | | ast Name | | | |
| United S | tates Bankruptcy Court for the: MIE | DDLE DISTRICT OF TENNESS | EE | | | |
| Case nu | mber | | | | | |
| (if known) | | | | | _ | eck if this is an |
| | | | | | ame | ended filing |
| Officia | I Form 106E/F | | | | | |
| | dule E/F: Creditors Who | Have Unsecured CI | aims | | | 12/15 |
| Schedule left. Attacl | G: Executory Contracts and Unexpired L D: Creditors Who Have Claims Secured I h the Continuation Page to this page. If y case number (if known). | by Property. If more space is need | led, copy the Part | you need, fill it out, i | number the entrie | es in the boxes on the |
| Part 1: | List All of Your PRIORITY Unsecu | red Claims | | | | |
| 1. Do a | ny creditors have priority unsecured clai | ms against you? | | | | |
| | o. Go to Part 2. | | | | | |
| ■ Y | es. | | | | | |
| identi possi | all of your priority unsecured claims. If a fy what type of claim it is. If a claim has both ble, list the claims in alphabetical order acco 1. If more than one creditor holds a particula | n priority and nonpriority amounts, list ording to the creditor's name. If you | st that claim here a have more than tw | nd show both priority a | nd nonpriority amo | ounts. As much as |
| (For a | an explanation of each type of claim, see the | e instructions for this form in the inst | ruction booklet.) | Total claim | Priority | Nonpriority |
| 2.1 | ine | Look 4 digito of account m | | ¢0.00 | amount | amount |
| | IRS Priority Creditor's Name | Last 4 digits of account no | umber | \$0.00 | \$0. | .00 \$0.00 |
| | MDP 146 | When was the debt incurre | ed? | | - | |
| | 801 BROADWAY Nashville, TN 37203 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim is: Check a | all that apply | | |
| | o incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of PRIORITY unsecu | red claim: | | | |
| | At least one of the debtors and another | ☐ Domestic support obliga | tions | | | |
| | Check if this claim is for a community de | Ebt Taxes and certain other | debts you owe the | government | | |
| | ne claim subject to offset? | ☐ Claims for death or pers | onal injury while yo | u were intoxicated | | |
| | No | Other Specify | | | | |

NOTICE ONLY

☐ Yes

| or 2 KIMBERLY ANN MEARS | | Case number (if know) | | |
|--|---|--|---|------------------------------|
| IRS | Last 4 digits of account number | \$10,000.00 | \$0.00 | \$10,000. |
| Priority Creditor's Name P.O. BOX 7346 | When was the debt incurred? | | | |
| Philadelphia, PA 19101-7348 Number Street City State Zlp Code | As of the date you file, the claim is: | Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | |
| ☐ Check if this claim is for a community debt | Taxes and certain other debts you | owe the government | | |
| Is the claim subject to offset? | ☐ Claims for death or personal injury | while you were intoxicated | | |
| ■ No | Other. Specify | | | |
| Yes | 2014, 2015, 20 TAXES | 016, and 2017 FEDERAL INCOM | E | |
| No. You have nothing to report in this part. Submit | this form to the court with your other sche | | nan one non; | priority |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t | b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than | b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the three nonpriority unsecured claims. | ncluded in Pa | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what t | b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than | b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the type. | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the assecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only ■ Debtor 2 only | this form to the court with your other sche | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 is: Check all that apply | ncluded in Pa ne Continuati | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the assecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim if Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans | holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the hold of the hold o | ncluded in Pa ne Continuati Total cla | art 1. If more on Page of |
| No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the needured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. American Credit Accept Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim if Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans | p holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the 1001 Opened 05/12 Last Active 11/28/14 is: Check all that apply | ncluded in Pa ne Continuati Total cla | art 1. If more on Page of |
| Nonpriority Creditor's Name 961 E Main St Spartanburg, SC 29302 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | this form to the court with your other sche e alphabetical order of the creditor who laim. For each claim listed, identify what to creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa | holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the hold of the hold o | ncluded in Pa ne Continuati Total cla | art 1. If more on Page of |

| KIMBERLY ANN MEARS | | Case number (if know) | |
|--|--|---|-----------|
| ASHWOOD COVE | Last 4 digits of account number | | \$1,903.0 |
| Nonpriority Creditor's Name 1735 LASCASSAS PIKE Murfreesboro, TN 37130 | When was the debt incurred? | | |
| Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims Debts to pension or profit-shari | ng plane, and other similar debte | |
| ■ No | <u>_</u> | | |
| Yes | Other. Specify | | |
| AWA Collections Nonpriority Creditor's Name | Last 4 digits of account number | 5743 | \$182.00 |
| AWA Collections 1045 W Katella Ave | When was the debt incurred? | Opened 02/13 | |
| Orange, CA 92867 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | no or the date you me, the claim | io. Oncok all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collection DENT.OF | Attorney IMPLANT GEN MID TN | |
| CALVARY PORTFOLIO SERVICES Nonpriority Creditor's Name | Last 4 digits of account number | 8589 | \$580.0 |
| 500 SUMMIT LAKE SUITE 400 | When was the debt incurred? | | |
| Valhalla, NY 10595 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| □ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □Yes | Other. Specify | | |

Debtor 1 WILLIAM JEFFERSON MEARS Debtor 2 KIMBERLY ANN MEARS Case number (if know) 4.5 COMCAST Last 4 digits of account number \$379.00 Nonpriority Creditor's Name P O BOX 530098 When was the debt incurred? Atlanta, GA 30353-0098 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 FAC/NAB Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **RE: ASHWOOD COVE** When was the debt incurred? **APARTEMENTS 480 JAMES ROBERTSON PKEY** Nashville, TN 37219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify NOTICE ONLY ☐ Yes 4.7 **FIRST PREMIER** Last 4 digits of account number 0475 \$838.00 Nonpriority Creditor's Name 9/2012 PO BOX 5524 When was the debt incurred? Sioux Falls, SD 57117-5524 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Doc 1

| ebtor 2 KIMB | ERLY ANN MEARS | | Case number (if know) | |
|--------------------|--|--|---|----------|
| | TENNESSEE BANK | Last 4 digits of account number | | \$92.00 |
| 123 W 7 | y Creditor's Name Fhompson Ln esboro, TN 37129 | When was the debt incurred? | | |
| | Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incu | rred the debt? Check one. | | | |
| Debtor | r 1 only | ☐ Contingent | | |
| ☐ Debtor | r 2 only | ☐ Unliquidated | | |
| ☐ Debtor | r 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At leas | st one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | if this claim is for a community | Student loans | | |
| | im subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | | Other. Specify | | |
| Fox Co | llection Center | Last 4 digits of account number | 6944 | \$745.00 |
| Nonpriority PO Box | y Creditor's Name (528 | When was the debt incurred? | Opened 5/31/12 | |
| | ttsvile, TN 37070 | _ | | |
| | treet City State Zlp Code rred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor | r 1 only | ☐ Contingent | | |
| ☐ Debtor | r 2 only | ☐ Unliquidated | | |
| _ | r 1 and Debtor 2 only | Disputed | | |
| | st one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| _ | if this claim is for a community | ☐ Student loans | | |
| debt | im subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | | Other. Specify MIDDLE TE | ENNESSEE IMAGING | |
| Fox Co | llection Center | Last 4 digits of account number | 3027 | \$156.00 |
| PO Box | | When was the debt incurred? | Opened 04/13 | |
| Number S | ttsvile, TN 37070 treet City State Zlp Code irred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor | | Пол | | |
| | • • | ☐ Contingent | | |
| ☐ Debtor | • | ☐ Unliquidated | | |
| | 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | st one of the debtors and another | Student loans | | |
| debt | if this claim is for a community im subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| - 110 | | · | Attorney CITY OF LAVERGNE/ | |
| ☐ Yes | | Other. Specify WATER DE | EPT | |

Doc 1

| or 1 WILLIAM JEFFERSON MEARS or 2 KIMBERLY ANN MEARS | Case number (if know) | |
|--|---|---------|
| MIDLAND FUNDING | Last 4 digits of account number 9308 | \$626.0 |
| Nonpriority Creditor's Name PO BOX 939069 | When was the debt incurred? | |
| San Diego, CA 92193 | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| ☐ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| ONEMAIN FINANCIAL | Last 4 digits of account number | \$0.0 |
| Nonpriority Creditor's Name 601 NW 2ND ST | When was the debt incurred? | |
| SUITE 300 | When was the dept incurred: | |
| Evansville, IN 47708 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | □ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify NOTICE ONLY | |
| PLANET FITNESS | Last 4 digits of account number | \$0.0 |
| Nonpriority Creditor's Name | | Ψ0.0 |
| 1954 OLD FORT PKWY SUITE 6 Murfreesboro, TN 37129 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ∏ Yes | Other Specific NOTICE ONLY | |

| KIMBERLY ANN MEARS | Case number (if know) | |
|---|---|------------|
| Receivable Solution | Last 4 digits of account number 8559 | \$81.00 |
| Nonpriority Creditor's Name PO Box 669 | When was the debt incurred? Opened 2/02/12 | |
| Natchez, MS 39121 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | Other. Specify CONCENTRA URGENT CARE | |
| REPUBLIC FINANCE | Last 4 digits of account number | \$6,383.00 |
| Nonpriority Creditor's Name 13600 EDS DRIVE, SUITE 100 Herndon, VA 20171-5407 | When was the debt incurred? | · • |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify VEHICLE WAS TOTALED AND JUNKED | |
| SPEEDY CASH | Last 4 digits of account number | \$585.00 |
| Nonpriority Creditor's Name 1698 Memorial Boulevard Murfreesboro, TN 37129 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ∏ _{Vos} | Other Consists | |

| 1 WILLIAM JEFFERSON MEARS 2 KIMBERLY ANN MEARS | | Case number (if know) | |
|--|---|--|-----------|
| TD BANK USA | Last 4 digits of account number | 3610 | \$442.0 |
| Nonpriority Creditor's Name PO BOX 9475 | When was the debt incurred? | | |
| Minneapolis, MN 55440 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify TARGET CI | REDIT CARD | |
| Verizon | Last 4 digits of account number | 0001 | \$1,155.0 |
| Nonpriority Creditor's Name | | | Ψ1,100.0 |
| Po Box 650051 Dallas, TX 75265 | When was the debt incurred? | Opened 11/07 Last Active 11/30/17 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| Who incurred the debt? Check one. | ,,,,,, | or o | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| Wakefield & Associates | | 1236 | \$226.0 |
| Nonpriority Creditor's Name 7005 Middlebrook Pike | Last 4 digits of account number When was the debt incurred? | Opened 8/27/12 | Ψ220.0 |
| Knoxville, TN 37909 | when was the dept incurred: | Opened 0/2//12 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | • | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify STONECRE | ST EMERGENCY DEPARTM | |

| Case | numbe | r (if know) |
|------|-------|-------------|
| Case | | I UI KIIOWI |

| Wakefield & Associates | Last 4 digits of account number 1365 | \$91.0 |
|---|---|--------|
| Nonpriority Creditor's Name 7005 Middlebrook Pike Knoxville, TN 37909 | When was the debt incurred? Opened 2/04/15 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Collection Attorney MURFREESBORO Other. Specify ANESTHESIA GROUP | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | - | Total Claim |
|--------------|-----|--|-----|---------|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | <u></u> | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 10,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | | | | | |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 10,000.00 |
| | | | | | |
| | C.f | Otovlant la ana | 04 | | Total Claim |
| T. (.) | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 6g. | \$ | 0.00 |
| | 6h. | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount | 6i. | \$ | 14,464.00 |
| | | here. | | Ψ | |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 14,464.00 |
| | | | | | |

| Fill in this inform | | | | | |
|---------------------|--------------------------|--------------------|-----------|--|--------------------------------------|
| Debtor 1 | WILLIAM JEFFER | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | KIMBERLY ANN I | MEARS | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court for the: | MIDDLE DISTRICT OF | TENNESSEE | | |
| Case number _ | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | AT&T PO BOX 5014 Carol Stream, IL 60197 | 1 YEAR CABLE/INTERNET CONTRACT RMP: \$120.00 ASSUME |
| 2.2 | COMCAST PO BOX 530098 Atlanta, GA 30353-0098 | 2 YEAR CABLE AND INTERNET CONTRACT RMP: \$178.00 REJECT |
| 2.3 | SPRINT CORPORATION ATTN BANKRUPTCY PO BOX 7949 Overland Park, KS 66207 | 2 YEAR CELLULAR CONTRACT RMP: \$225.00 ASSUME |

| Fill in this infor | mation to identify yo | ur case: | | | |
|------------------------------------|---|---|-------------------------|---|---|
| Debtor 1 | WILLIAM JEFF | ERSON MEARS | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | KIMBERLY AN First Name | N MEARS Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the | : MIDDLE DISTRICT OF | TENNESSEE | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official Ec | orm 106H | | | | |
| | H: Your Co | dehtors | | | 12/15 |
| Scrieduic | 711. 1 Out OU | debioi 3 | | | 12/13 |
| ill it out, and nu our name and | umber the entries in t case number (if knov | | the Additional Page to | this page. On the top | eeded, copy the Additional Page, o of any Additional Pages, write |
| ■ Yes | | | | | |
| | | rou lived in a community prona, Nevada, New Mexico, Pue | | | states and territories include |
| ■ No. Go to | o line 3. | | | | |
| ☐ Yes. Did | your spouse, former s | oouse, or legal equivalent live | with you at the time? | | |
| in line 2 ag | ain as a codebtor on), Schedule E/F (Offic | y if that person is a guarant | or or cosigner. Make su | ire you have listed th | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | nn 1: Your codebtor Number, Street, City, State an | d ZIP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| - | .IAM EUGENE ME <i>A</i> . PROVIDE HER | ARS | | ■ Schedule D, lin □ Schedule E/F, □ Schedule G Ally Financial | |

Schedule H: Your Codebtors

| E-11 | | | | | | | • | | | | | | |
|-------------|--|-------------------|--|----------------------|--|--------------|---------|--|--------------|------------------------|---------|--|--|
| | in this information to the total to the thick the thick the the thick the th | | FFERSON MEARS | | | | | | | | | | |
| | btor 2 buse, if filing) | KIMBERLY | ANN MEARS | | | | | | | | | | |
| | | tcy Court for the | : MIDDLE DISTRICT O | F TENN | ESSEE | | | | | | | | |
| _ | se number | | | | | | | Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: | | | | | |
| 0 | fficial Form | 106I | | | | | | MM / DD/ Y | | mowning date. | | | |
| S | chedule I: | Your Inc | ome | | | | | IVIIVI / DD/ I | | | 12/15 | | |
| spo atta | use. If you are sep ch a separate shee | arated and you | are married and not filir r spouse is not filing wi On the top of any addition | th you, | do not includ | le informati | on ab | out your spo | use. If mo | re space is n | eeded, | | |
| 1. | Fill in your employment information. | | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | | | | |
| | If you have more than one attach a separate page wi information about addition employers. | | Employment status | ■ Employed | | | | ■ Employed | | | | | |
| | | | Employment status | ☐ Not employed | | | | ☐ Not employed | | | | | |
| | | | Occupation | DRIV | DRIVER | | | AUTO CLAIM ASSOCIATE | | | | | |
| | Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. | | Employer's name | CITY OF MURFREESBORO | | | | STATE FARM MUTUAL AUTOMOBILE INSURANCE | | | | | |
| | | | Employer's address | 111 V | PO BOX 1139 111 WEST VINE STREET Murfreesboro, TN 37133-1139 | | | ATTY: BANKRUPTCY DEPT One State Farm Plaza Bloomington, IL 61710 | | | | | |
| | | | How long employed th | nere? | 10 YEAR | RS | | | 7 YEARS | i | | | |
| Par | rt 2: Give De | tails About Mor | nthly Income | | | | | | | | | | |
| | mate monthly incouse unless you are | | ate you file this form. If y | ou have | e nothing to re | port for any | line, w | rite \$0 in the | space. Inc | lude your non- | filing | | |
| | ou or your non-filing e space, attach a se | | ore than one employer, co | mbine th | ne information | for all empl | oyers | for that perso | n on the lir | nes below. If yo | ou need | | |
| | | | | | | | For I | Debtor 1 | | otor 2 or ng spouse | | | |
| 2. | | | ry, and commissions (be | | | 2. \$ | | 2,184.00 | \$ | 3,882.00 | | | |

0.00

3,882.00

0.00

2,184.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Debtor 1 WILLIAM JEFFERSON MEARS
Debtor 2 KIMBERLY ANN MEARS

Case number (if known)

| | | | | | Fo | r Debtor 1 | | or Debtor on-filing s | | |
|-----|---|---|----------|-----------|------|-------------------------------|-------------------|--------------------------|--------------------|----------|
| | Copy | y line 4 here | 4. | | \$ | 2,184.00 | \$ | | 882.00 | |
| | | | | | - | | - | | , | • |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 58 | a. | \$_ | 590.00 | \$ | | 466.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5k | Э. | \$ | 0.00 | \$ | • | 0.00 | • |
| | 5c. | Voluntary contributions for retirement plans | 50 | Э. | \$ | 0.00 | \$ | | 217.00 | • |
| | 5d. | Required repayments of retirement fund loans | 50 | d. | \$ | 0.00 | \$ | | 0.00 | • |
| | 5e. | Insurance | 56 | Э. | \$ | 124.00 | \$ | | 301.00 | • |
| | 5f. | Domestic support obligations | 5f | | \$ | 0.00 | \$ | | 0.00 | |
| | 5g. | Union dues | 50 | a. | \$ | 0.00 | \$ | | 0.00 | |
| | 5h. | Other deductions. Specify: HEATHCARE FSA | - | า.+ | \$ | 0.00 | ⊦\$ | | 45.00 | • |
| | | DISABILITY INSURANCE | _ | | \$ | 0.00 | \$ | | 4.00 | |
| | | LIFE INSURANCE | _ | | \$ | 0.00 | \$ | | 10.00 | |
| | | AFLAC | _ | | \$- | 70.00 | \$ | | 0.00 | |
| _ | | | | | · - | | · - | | | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 784.00 | \$_ | | ,043.00 | |
| 7. | | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 1,400.00 | \$_ | 2 | ,839.00 | |
| 8. | | all other income regularly received: | | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | | | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 88 | a. | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8k | Э. | \$ | 0.00 | \$ | | 0.00 | • |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | | - | | - | | | |
| | | regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | | | |
| | | settlement, and property settlement. | 80 | | \$_ | 0.00 | \$ | | 0.00 | |
| | 8d. | Unemployment compensation | 80 | d. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8e. | Social Security | 86 | Э. | \$ | 0.00 | \$ | | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | : | \$ | 0.00 | \$ | | 0.00 | |
| | 8g. | Pension or retirement income | _ 8g | | \$ | 0.00 | \$ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | | ง. า.+ | · - | 0.00 | - \$ ⁻ | | 0.00 | |
| | 011. | | _ " | | Ψ- | 0.00 | · | | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$_ | 0.00 | \$_ | | 0.00 | |
| 10 | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,400.00 + \$ | _ | .839.00 | = \$ | 4.239.00 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | 1,400.00 τ Ψ_ | | ,039.00 | ⁻ Ψ — | 4,239.00 |
| | Auu | the entities in line 10 for Debtor 1 and Debtor 2 or non-hilling spouse. | ļ | | | | | | | |
| 11. | State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resist that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | e. 12. | \$ | 4,239.00 |
| | | | | | | | | | Combir | ned |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form? No. | ? | | | | | | monthly | y income |
| | | Yes. Explain: DEBTOR-WIFE IS ORDERED TO RECEIVE CHILD NOVEMBER 2017 DEBTOR HUSBAND'S B22 IN HOLIDAY PAY AND LONGEVITY PAY OVER THE NOT WORKING AS MUCH OVERTIME AS SHE HA | CO LA | ME ST | SI : | DIFFERENCE E (MONTHS. DEE | BEC BTO | AUSE H | IE RECE | EIVED |

| | in this informa | ation to identify yo | N. 1. 0000: | | | | | | | | | |
|------|----------------------------|---------------------------------------|----------------|---|--|---|-----------------|-------------------------------|--|--|--|--|
| | | | | | | | | | | | | |
| Deb | tor 1 | WILLIAM JE | FFERSO | N MEARS | | Check if this is: | | | | | | |
| | otor 2 ouse, if filing) | KIMBERLY A | ANN MEA | ARS | | ☐ An amended filing☐ A supplement showing postpetition chapter13 expenses as of the following date: | | | | | | |
| Unit | ed States Bank | ruptcy Court for the | : MIDDLI | E DISTRICT OF TENNESS | SEE | 1 | MM / DD / YYYY | | | | | |
| | e number nown) | | | | | | | | | | | |
| | | orm 106J | | | | | | | | | | |
| | | J: Your | | | | | | 12/15 | | | | |
| info | ormation. If n | | eded, atta | . If two married people ar ch another sheet to this n. | | | | | | | | |
| Par | | ribe Your House | hold | | | | | | | | | |
| 1. | Is this a joi | nt case? | | | | | | | | | | |
| | ☐ No. Go to | | | | | | | | | | | |
| | ■ Yes. Do e | es Debtor 2 live i | in a separ | ate household? | | | | | | | | |
| | ■ N | | st file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | hold of Debto | or 2. | | | | | |
| 2. | Do you hav | e dependents? | □ No | | | | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? | | | | |
| | Do not state | the | | | | | | □ No | | | | |
| | dependents | | | | Daughter | | 12 | ■ Yes | | | | |
| | | | | | | | | □ No | | | | |
| | | | | | | | | ☐ Yes | | | | |
| | | | | | | | | □ No □ Yes | | | | |
| | | | | | | | | □ No | | | | |
| | | | | | | | | ☐ Yes | | | | |
| 3. | | penses include | | No | | | | | | | | |
| | | of people other the d your depende | han ┌┐ | Yes | | | | | | | | |
| D | | | | | | | | | | | | |
| Est | imate your e | a date after the l | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | | | | |
| the | | h assistance an | | government assistance i luded it on <i>Schedule I:</i> \ | | | Your expe | enses | | | | |
| | | | | | | | | | | | | |
| 4. | | or home owners nd any rent for the | | ses for your residence. I or lot. | nclude first mortgage | 4. \$ | | 1,025.00 | | | | |
| | If not inclu | ded in line 4: | | | | | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | | 0.00 | | | | |
| | | erty, homeowner's | | | | 4b. \$ | | 0.00 | | | | |
| | | | | ıpkeep expenses | | 4c. \$ | | 0.00 | | | | |
| 5 | | eowner's associat | | | mo oquity loops | 4d. \$ 5. \$ | | 0.00 | | | | |
| 5. | Auditional | mortgage payme | ante for yo | our residence, such as ho | me equity loans | 5. \$ | | 0.00 | | | | |

Official Form 106J

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

Yes. Explain here: **DEBTORS' RENT INCLUDES THEIR ELECTRICITY.**

| Fill in this inform | nation to identify your | case: | | | | |
|---------------------|---|---------------------------|---------------|---------|--|--|
| Debtor 1 | WILLIAM JEFFER | SON MEARS | | | | |
| | First Name | Middle Name | Las | st Name | | |
| Debtor 2 | KIMBERLY ANN | MEARS | | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | st Name | _ | |
| United States Ba | nkruptcy Court for the: | MIDDLE DISTRICT OF | TENNESSE | ΕE | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing |
| Official Forn | n 106Dec | | | | | |
| | - | an Individua | l Debt | or's | Schedules | 12/15 |
| | | | | | | |
| f two married pe | ople are filing togethe | r, both are equally respo | onsible for s | upplyir | ng correct information. | |
| obtaining money | | n connection with a ban | | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Sign | n Below | | | | | |
| | | | | | | |
| Did you pay | y or agree to pay some | one who is NOT an atto | rney to help | you fil | I out bankruptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. N | lame of person | | | | Attach Ban | nkruptcy Petition Preparer's Notice, |
| | | | | | Declaration | n, and Signature (Official Form 119) |
| | | | | | | |
| | ity of perjury, I declare true and correct. | that I have read the sun | nmary and s | chedul | es filed with this declarati | on and |
| Y /c/ \\ | IIAM IEEEEDSON N | MEADS | v | lel KI | MDEDI V ANN MEADS | |
| | LIAM JEFFERSON N M JEFFERSON MEA | | ^ | | MBERLY ANN MEARS BERLY ANN MEARS | |
| | e of Debtor 1 | 1110 | | | ture of Debtor 2 | |
| 2.3.16161 | | | | | ·· · · · · · · · · · · · · · · · · · · | |
| Date J | lanuary 31, 2018 | | | Date | January 31, 2018 | |
| | | | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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| | l in this inforn | nation to identify your | r case: | | | |
|-------------------|---------------------|--|--|------------------------------------|--|-------------------------------------|
| De | btor 1 | WILLIAM JEFFE First Name | | Lord Name | | |
| De | btor 2 | KIMBERLY ANN | Middle Name | Last Name | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bai | nkruptcy Court for the: | MIDDLE DISTRICT OF T | ENNESSEE | | |
| Ca | se number | | | | | |
| (if k | nown) | | <u> </u> | | _ | heck if this is an mended filing |
| \sim 1 | | was 407 | | | | |
| | fficial Fo | | Affairs for Individ | luals Filing for B | ankruntev | 4/16 |
| | | | | | equally responsible for sup | |
| info | rmation. If m | | attach a separate sheet to | | additional pages, write you | |
| | <u> </u> | , | | | | |
| | - | r current marital statu | rital Status and Where You | Lived Before | | |
| 1. | | Current marital statu | 15 (| | | |
| | ■ Married □ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | _ | t all of the places you li | ived in the last 3 years. Do no | ot include where you live now | '. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory co, Texas, Washington and W | |
| | _ | | | , | J | , |
| | ■ No □ Yes. Ma | ike sure vou fill out <i>Sch</i> | nedule H: Your Codebtors (Of | ficial Form 106H) | | |
| | | ine sare you iii out oor | icadio II. Todi Godobiolo (Gi | noidi i omi roomj. | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | dar years? |
| | □ No | | | | | |
| | _ | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,052.00 | ■ Wages, commissions, bonuses, tips | \$1,792.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

| | | Debtor 1 | | Debtor 2 | |
|-------------------|---|--|--|---|---|
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | alendar year: 1 to December 31, 201 | Wages, commissions, bonuses, tips | \$36,044.00 | ■ Wages, commissions, bonuses, tips | \$46,127.00 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | alendar year before th 1 to December 31, 201 | | \$35,526.00 | ■ Wages, commissions, bonuses, tips | \$47,154.00 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| winnir List ea | ngs. If you are filing a jo | nents; pensions; rental income; interint case and you have income that yes income from each source separa | you received together, list it o | nly once under Debtor 1. | - |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | uary 1 of current year | | \$0.00 | Child Support | \$3,540.00 |
| 6. <u>A</u> re e | ither Debtor 1's or De | s You Made Before You Filed for btor 2's debts primarily consume nor Debtor 2 has primarily consu | r debts? | s are defined in 11 U.S.C. § 10 | 01(8) as "incurred by an |
| | | y for a personal, family, or househo | | Ÿ | , |
| | ☐ No. Go to ☐ Yes List b paid not in | rs before you filed for bankruptcy, di b line 7. below each creditor to whom you pai that creditor. Do not include paymen aclude payments to an attorney for the | id a total of \$6,425* or more ints for domestic support oblights bankruptcy case. | n one or more payments and t ations, such as child support a | and alimony. Also, do |
| | , , | stment on 4/01/19 and every 3 year | | or after the date of adjustment | t. |
| - \ | | tor 2 or both have primarily consures before you filed for bankruptcy, di | | of \$600 or more? | |
| | □ No. Go to | line 7. | | | |
| | Yes List b | elow each creditor to whom you pai | | | |

attorney for this bankruptcy case.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the Property

Explain what happened

page 3

Value of the property

Date

Creditor Name and Address

| _ | btor 1 btor 2 | WILLIAM JEFFERSON MEARS KIMBERLY ANN MEARS | | Case numb | er (if known) | | | | |
|-----|------------------|---|----------|---|----------------------------|---------------------------|--|--|--|
| 11. | acco | unts or refuse to make a payment be | | did any creditor, including a bank or financial i you owed a debt? | institution, set off any a | amounts from your | | | |
| | _ | No Yes. Fill in the details. | | | | | | | |
| | | | ъ. | and the section discount to the | Data antino com | A 1 | | | |
| | Cred | ditor Name and Address | Des | scribe the action the creditor took | Date action was taken | Amount | | | |
| 12. | | in 1 year before you filed for bankrup t-appointed receiver, a custodian, or | | as any of your property in the possession of a er official? | n assignee for the bend | efit of creditors, a | | | |
| | | No | | | | | | | |
| | | Yes | | | | | | | |
| Pai | rt 5: | List Certain Gifts and Contributions | 5 | | | | | | |
| 13. | Withi | in 2 years before you filed for bankru | ıptcy, d | lid you give any gifts with a total value of more | e than \$600 per person | ? | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details for each gift. | | | | | | | |
| | | s with a total value of more than \$600 person |) | Describe the gifts | Dates you gave the gifts | Value | | | |
| | | son to Whom You Gave the Gift and ress: | | | | | | | |
| 14. | _ | Vithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☑ No | | | | | | | |
| | • | Yes. Fill in the details for each gift or co | ntributi | on. | | | | | |
| | more Cha | s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code) | | Describe what you contributed | Dates you contributed | Value | | | |
| | 521 | Experience Community Old Salem Rd freesboro, TN 37129 | | MONTHLY TITHES AND OFFERING | MONTHLY | \$87.00 | | | |
| Pai | rt 6: | List Certain Losses | | | | | | | |
| 15. | | in 1 year before you filed for bankrup mbling? | otcy or | since you filed for bankruptcy, did you lose ar | nything because of the | t, fire, other disaster | | | |
| | _ | | | | | | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | the loss occurred | Include | be any insurance coverage for the loss the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | |
| Pai | rt 7: | List Certain Payments or Transfers | | | | | | | |
| 16. | cons | ulted about seeking bankruptcy or p | reparin | d you or anyone else acting on your behalf paging a bankruptcy petition? s, or credit counseling agencies for services requi | | rty to anyone you | | | |
| | | No | | | | | | | |
| | _ | Yes. Fill in the details. | | | | | | | |
| | | son Who Was Paid | | Description and value of any property | Date payment | Amount of | | | |
| | Add Ema | ress iil or website address son Who Made the Payment, if Not Yo | ou | transferred | or transfer was made | payment | | | |
| | Aba 157 | icus Credit Counseling 60 Ventura Blvd, Ste 700 ino, CA 91436 | | CREDIT COUNSELING | 1/15/18 | \$25.00 | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

| 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyon promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | erty to anyone who | | |
|---|--|--|-----------------------------|--------------------|--|---|
| | No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and value transferred | lue of any prop | perty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No | siness or financial affair e as security (such as the | s? | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and val | | payment | e any property or es received or debts exchange | Date transfer was made |
| | Person's relationship to you | | | | | |
| | C&f Finance Company 1313 E Main St Ste 400 Richmond, VA 23219 | 2008 MUSTANG VALUE \$15,970 | | \$15,970 | .00 | FEBRUARY 2016 |
| | ■ No □ Yes. Fill in the details. Name of trust | Description and val | lue of the prop | erty transfe | rred | Date Transfer was |
| | Name of trust | Description and var | ide of the prop | erty transie | ileu | made |
| Par | rt 8: List of Certain Financial Accounts, Instr | ruments. Safe Denosit F | Roxes, and Sto | rage Units | | |
| | · | • | , | • | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or | • | | | | |
| | houses, pension funds, cooperatives, associa No | | , | | onales III baliks, cieul | t unions, brokerage |
| | ☐ Yes. Fill in the details. | | | | | |
| | | • | Type of accou instrument | c | ate account was losed, sold, noved, or ransferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ar before you filed for b | ankruptcy, an | y safe depos | sit box or other depos | itory for securities, |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acces Address (Number, Street | | Describe the | e contents | Do you still have it? |
| | | State and ZIP Code) | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 22. | Have you stored property in a storage unit or p | lace other than your home within 1 | year before you filed for bankruptcy | ? |
|-------|---|--|---------------------------------------|-----------------------|
| | | · | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? | Describe the contents | Do you still have it? |
| | | Address (Number, Street, City, State and ZIP Code) | | |
| Par | 19: Identify Property You Hold or Control for | Someone Else | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any proper | ty you borrowed from, are storing for | r, or hold in trust |
| | ■ No | | | |
| | Yes. Fill in the details. | When to the superior O | December the management | Walan |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | 10: Give Details About Environmental Inform | ation | | |
| For | he purpose of Part 10, the following definitions | apply: | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, ground | · · · · · · · · · · · · · · · · · · · | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | - | law, whether you now own, operate, | or utilize it or used |
| | Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic s | substance, |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of wher | they occurred. | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | under or in violation of an environme | ental law? |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or admini | strative proceeding under any envi | ronmental law? Include settlements a | and orders. |
| | ■ No □ Yes. Fill in the details. | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | 11: Give Details About Your Business or Cor | nnections to Any Business | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have an | y of the following connections to any | / business? |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | ip (LLP) | |
| Offic | | of Financial Affairs for Individuals Filing | | page |

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| Debtor 1 Debtor 2 | WILLIAM JEFFERSON MEARS KIMBERLY ANN MEARS | | Cas | se number (if known) |
|--|---|----------------------|-----------------------------|---|
| | . | | | |
| | ☐ A partner in a partnership | | | |
| | ☐ An officer, director, or managing exe | ecutive of a corpor | ration | |
| | ☐ An owner of at least 5% of the voting | g or equity securit | ies of a corporation | |
| | No. None of the above applies. Go to P | Part 12. | | |
| | Yes. Check all that apply above and fill | in the details belo | w for each business. | |
| | iness Name Iress | Describe the natu | ure of the business | Employer Identification number Do not include Social Security number or ITIN. |
| (Num | ber, Street, City, State and ZIP Code) | Name of account | ant or bookkeeper | Dates business existed |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? | | | | nyone about your business? Include all financial |
| _ | No Yes. Fill in the details below. | | | |
| | ne Iress ber, Street, City, State and ZIP Code) | Date Issued | | |
| Part 12: | Sign Below | | | |
| are true a with a bar | | false statement, co | oncealing property, or ol | declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both. |
| /s/ WILL | IAM JEFFERSON MEARS | /s/ KIME | BERLY ANN MEARS | |
| | M JEFFERSON MEARS | | RLY ANN MEARS | |
| Signatur | e of Debtor 1 | Signatur | e of Debtor 2 | |
| Date _J; | anuary 31, 2018 | Date _ | January 31, 2018 | |
| Did you and No ☐ Yes | ttach additional pages to Your Stateme | ent of Financial Aff | airs for Individuals Filing | g for Bankruptcy (Official Form 107)? |
| ■ No | ay or agree to pay someone who is not | - | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation | |
|------------|----|--------------------|--|
| \$245 | 5 | filing fee | |
| \$75 | 5 | administrative fee | |
| + \$15 | 5_ | trustee surcharge | |
| \$335 | 5 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy CourtMiddle District of Tennessee

| In re | WILLIAM JEFFERSON MEARS | S | Case No. | |
|--------|---------------------------------|---|---------------|---------------------|
| | | Debtor(s) | Chapter | 13 |
| | | | | |
| | VER | RIFICATION OF CREDITOR MA | ATRIX | |
| 'he ah | ove named Debtors bereby verify | that the attached list of creditors is true and correc | t to the best | of their knowledge |
| ne ao | ove named Debiots hereby verify | that the attached list of electrons is true and correct | t to the best | or their knowledge. |
| Date: | January 31, 2018 | /s/ WILLIAM JEFFERSON MEARS | | |
| | | WILLIAM JEFFERSON MEARS | | |
| | | Signature of Debtor | | |

/s/ KIMBERLY ANN MEARS KIMBERLY ANN MEARS Signature of Debtor

Date: January 31, 2018

WILLIAM JEFFERSON MEARS 539 MORRIS DR.
MURFREESBORO TN 37130

KIMBERLY ANN MEARS 539 MORRIS DR. MURFREESBORO TN 37130

JAMES A. FLEXER FLEXER LAW 1900 CHURCH STREET, SUITE 400 NASHVILLE, TN 37203

ALLY FINANCIAL ATTN MANAGING OFFICER P.O. BOX 380901 BLOOMINGTON MN 55438

AMERICAN CREDIT ACCEPT 961 E MAIN ST SPARTANBURG SC 29302

ASHWOOD COVE 1735 LASCASSAS PIKE MURFREESBORO TN 37130

AWA COLLECTIONS AWA COLLECTIONS 1045 W KATELLA AVE ORANGE CA 92867

C&F FINANCE COMPANY 1313 E MAIN ST STE 400 RICHMOND VA 23219

CALVARY PORTFOLIO SERVICES 500 SUMMIT LAKE SUITE 400 VALHALLA NY 10595

COMCAST
P O BOX 530098
ATLANTA GA 30353-0098

COMCAST
PO BOX 530098
ATLANTA GA 30353-0098

CONN'S HOMEPLUS ATTN: BANKRUPTCY PO BOX 2358 BEAUMONT TX 77704 COVINGTON CREDIT/SMC 150 EXECUTIVE CENTER DRIVE GREENVILLE SC 29615

FAC/NAB

RE: ASHWOOD COVE APARTEMENTS 480 JAMES ROBERTSON PKEY NASHVILLE TN 37219

FIRST PREMIER
PO BOX 5524
SIOUX FALLS SD 57117-5524

FIRST TENNESSEE BANK 123 W THOMPSON LN MURFREESBORO TN 37129

FOX COLLECTION CENTER PO BOX 528 GOODLETTSVILE TN 37070

IRS MDP 146 801 BROADWAY NASHVILLE TN 37203

IRS
P.O. BOX 7346
PHILADELPHIA PA 19101-7348

MIDLAND FUNDING PO BOX 939069 SAN DIEGO CA 92193

MUSIC STOP 215 ROBERT ROSE DR MURFREESBORO TN 37129

ONEMAIN FINANCIAL 601 NW 2ND ST SUITE 300 EVANSVILLE IN 47708

PATRIOT 5185 PETERS CREEK ROAD ROANOKE VA 24019

PLANET FITNESS 1954 OLD FORT PKWY SUITE 6 MURFREESBORO TN 37129

RECEIVABLE SOLUTION PO BOX 669 NATCHEZ MS 39121 REPUBLIC FINANCE 13600 EDS DRIVE, SUITE 100 HERNDON VA 20171-5407

SPEEDY CASH 1698 MEMORIAL BOULEVARD MURFREESBORO TN 37129

TD BANK USA PO BOX 9475 MINNEAPOLIS MN 55440

VERIZON PO BOX 650051 DALLAS TX 75265

WAKEFIELD & ASSOCIATES 7005 MIDDLEBROOK PIKE KNOXVILLE TN 37909

WILLIAM EUGENE MEARS WILL PROVIDE

WORLD ACCEPTANCE CORP ATTN: BANKRUPTCY PO BOX 6429 GREENVILLE SC 29606